of iodine content in salt at household level indicated a very low eve of iodine amongst the samples studied. Studies on thyroid hormone and growth and development amongst school children is proposed.

Drug use specially intra-venous (IV) users are an important public health issue with an expected 1 per cent level of abusers. The Centre has proposed to develop a network for providing de-addiction programme facilities in collaboration with the All India Institute of Medical Sciences.

Screening of 8000 persons revealed an infection rate of 0.75 per thousand screened in upper Assam. Six were sero positive. None of the 500 tea garden workers and 1500 members from IOC showed HIV infection. Surveys for knowledge and attitude related to AIDS amongst college students indicates a poor response.

Studies on indigenous plant have been proposed in collaboration with RRL, Jorhat. Exchange of technical know-how and facilities would form an important component.

The Centre is interacting with other sister institutions and local scientists as well as ICMR institutes all over the country and plans to set up never and more advanced techniques for sero diagnosis and investigations.

Similarly a wide net work of Nagaland, Manipur, Arunachal Pradesh, Mizoram and Assam has been covered to study the cases of nasopharyngeal cancer from the various medical colleges in the region. At Mizoram, 5 cases of nasopharyngeal cancer were seen attending the collaborating centre's hospital during 1987-88.

The Centre needs further strengthening through establishing links with national health informatics centre; electronic data processing and documentation and enhancing supportive services for a more effective project management.

The socio-political problems in the region inhibit extensive field surveys and movement of the research staff amongst the various states in the NE region.

The Centre has nine divisions at the Dibrugarh head-quarters office dealing with cancer biology, virology, immunology and pathology, biochemistry, epidemiology and statistics, clinical research, microbiology and haematology, Malariology and the library.

The Centre proposed to establish a core-group for facilitating collaboration and interaction with the seven NE States. So as to provide them with information about RMRC's activities and facilities; and identify State problems where RMRC's technical inputs would be of benefit.

Assistance to control T.B. in Andhra Pradesh

8192. SHRI T. VENKATRAM REDDY:

SHRI G. PRATHAPA REDDY:

Will the PRIME MINISTER be pleased to state:

(a) whether Tuberculosis (TB) has broken out on a large scale in Andhra Pradesh;

(b) what assistance has been provided by the Central Government to control T.B. in Andhra Pradesh;

(c) whether this assistance has reached the State Government; and

(d) if so, the details thereof?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (DR. C. SILVERA): (a) No, Sir.

(b) During 1994-95 Central assistance under the programme to Andhra Pradesh was Rs. 272.56 lakhs.

(c) & (d) Yes, Sir. Details of Central assistance during 1994-95 under National Tuberculosis Control Programme

in the state of Andhra Pradesh are as under:—

(Rs. in lakhs)

Anti-TB drugs	Material & Equipment	Total
265.84	6.72	272.56

Complaints regarding non-supply of Medicines

8193. SHRI RAMDAS AGARWAL: Will the PRIME MINISTER be pleased to state:

(a) the number of complaints for non-supply as well as of poor quality of medicines supplied through Central Government Health Scheme received by his Ministry during the last three years and till date, if so, the action taken thereon, year-wise;

(b) whether Government have fixed any criteria for procuring/supplying essential medicines to the C.G.H.S. beneficiaries;

(c) whether Government have recently decided to procure quality medicines from reputed companies; and

(d) if so, the details thereof and if not, the reasons therefor?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (DR. C. SILVERA): (a) The total number of complaints received during the last three years and till date is 42.

The following action has been taken:—

1. Recordable warning has been issued to the staff members concerned.

2. C.M.Os/M.Os. Incharges were advised to make suitable arrangements to avoid such recurrence.

3. Enquiries were instituted in some cases and the concerned party was cautioned.

4. Some of the complaints are being investigated.

(b) All the medicines prescribed to the beneficiaries are supplied from the CGHS Dispensary. In case of non-availability of a particular medicines, the some is procured through special indent/authority slip from the authorised chemist.

(c) and (d) As per the policy of the Government, all medicines are procured from the Medical Stores Organisation.

Functioning of C.G.H.S. Unani Dispensary, Sarojini Nagar, New Delhi

8194. MAULANA OBAIDULLAH KHAN AZMI: Will the PRIME MINISTER be pleased to state:

(a) whether it is a fact that the Doctors posted in the C.GH.S. Unani Dispensary. Sarojini Nagar, New Delhi do not observe punctuality which causes a lot of inconvenience to patients;

(b) whether it is also a fact that the attitude and behaviour of the doctors towards the patients is non-cooperative;

(c) whether Government are aware that the quantity of medicines being given to patients is generally less than what is required for the disease;

(d) if so, what are the reasons therefor; and

(e) the steps taken/being taken to remedy the situation?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (DR. C. SILVERA): (a) No, Sir, as no such complaint has been received.